

EXHIBIT A

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CLERK DISTRICT COURT

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MONTANA FIRST JUDICIAL DISTRICT COURT
LEWIS AND CLARK COUNTY

STATE OF MONTANA,

Plaintiff,

v.

PURDUE PHARMA L.P., PURDUE
PHARMA, INC., THE PURDUE
FREDERICK COMPANY INC., and
JANE DOES 1-10,

Defendants.

Cause No. ADV-2017-949

**PLAINTIFF STATE OF MONTANA'S
MOTION FOR PRELIMINARY
INJUNCTION**

Pursuant to Mont. Code Ann. §§ 27-19-201 and 30-14-111(1), Plaintiff State of Montana (“State”) requests a preliminary injunction against Defendant Purdue Pharma L.P., and its related corporate entities (collectively, “Purdue”) to immediately require Purdue, during the pendency of this lawsuit, and in order to limit new opioid addiction, overdoses and death, to cease deceptively marketing its opioids for chronic pain, to correct its past misrepresentations, and to fulfill its obligation to report suspicious orders. As explained in the State’s Memorandum in Support filed with this motion, first injunctive term requested below is derived from Purdue’s own public announcement. The next several injunctive terms are derived from findings and recommendations in the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (“CDC”) Guideline for Prescribing Opioids for Chronic Pain (2016).

The Court’s Order should direct Purdue as follows:

- 1) Immediately cease all sales representative promotions of opioid drugs to prescribers in Montana, committing to the announcement Purdue already made that it would halt such efforts.
- 2) In all other promotional or educational activity that could reach Montana prescribers or consumers:
 - a. Immediately cease promoting its opioid drugs, or opioids in general, as a first-line or routine therapy for chronic pain (i.e., pain continuing or expected to continue >3 months or past the time of normal tissue healing outside of active cancer, palliative, and end-of-life care), and in any promotional or educational activity, disclose that opioids are to be tried only after other treatments have failed. CDC Guideline at 19.
 - b. Immediately cease making any representations or suggestions that there is evidence that opioids provide a long-term benefit for pain, function or quality of life, and in any promotional or educational activity, disclose that there is no evidence that opioids improve pain, function, or quality of life long-term. CDC Guideline at 15, 18-19.
 - c. Immediately cease representing or suggesting that there are adequate screening or risk-stratification tools to classify patients as low risk for abuse or misuse, or to eliminate risks from long-term opioid therapy, and in any promotional or educational activity, disclose that there is no evidence that screening or risk-

stratification tools are effective in preventing addiction or limiting other risks of long-term opioid use. CDC Guideline at 28.

- d. Immediately cease making any representations or suggestions that Purdue's abuse-deterrent formulation are effective in deterring or preventing overall abuse or addiction, and in any promotional or educational activity, disclose that abuse-deterrent formulations do not deter oral abuse and have not been shown to reduce overall abuse or addiction. CDC Guideline at 22.
- e. Immediately cease making any representations or suggestions that the use of opioids to treat chronic pain does not carry a serious risk of addiction, and in any promotional or educational activity, disclose that long-term opioid use for chronic pain is associated with serious risks including increased risk for opioid use disorder, overdose, myocardial infarction, and motor vehicle injury; and that even when opioids are indicated, prescribers should use the lowest effective dosage and should avoid increasing dosage to ≥ 90 morphine milligram equivalents ("MME") /day or carefully justify a decision to titrate dosage to ≥ 90 MME/day. CDC Guideline at 18, 22.

The injunction also should include the following measures to further abate the public nuisance Purdue has created, which are consistent with existing federal law that requires Purdue to maintain effective controls against diversion, 21 U.S.C. § 823(a)(1), and design and operate a system to disclose to the U.S. Drug Enforcement Administration suspicious orders of controlled substances, 21 C.F.R. § 1301.74(b):

- 1) Implement a program to monitor suspicious orders from pharmacies and suspicious prescribing patterns and timely report such suspicious orders to the Montana Board of Medical Examiners or the Montana Board of Pharmacy, as appropriate; and

- 2) Submit a monthly compliance monitoring disclosure statement to the Montana Attorney General, including measures taken to implement the monitoring program required above and a list of doctors to whom Purdue has promoted opioids, together with all call notes from such promotions.

DATED this 20th day of February, 2018.

THE STATE OF MONTANA



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